



TOWN OF MERRIMACK, NEW HAMPSHIRE

FINANCE DEPARTMENT

6 Baboosic Lake Road
Merrimack, NH 03054

Tel: 603-424-7075

Fax: 603-424-0516

April 22, 2015

ADDENDUM
TO
REQUEST FOR BID
Roof Replacement at Ambulance Garage

In reference to the Town of Merrimack's Request for Bid for the roof replacement at the Ambulance Garage, due Tuesday, April 28, 2014, ***please be advised that the following changes were made during the walk-through:***

- The fees to use the Transfer Station will be waived provided the winning vendor ships in their own truck or trailer, not a dumpster.
- The conduit pipe at the back of the building shall be cut and capped.
- New flashing shall be added to the chimney (approval of flashing material by Town).
- New Azex or similar rakes & fascia
- Installation of metal drip edge over door – 8 feet long.
- Installation of new PVC boot for chimney
- Plywood sheathing (Town will negotiate needs and costs if issues are present with existing sheathing)
- Add 8" flashing – white aluminum
- Nailing only – no stapling
- The following will be optional items that the Town may or may not add to the scope of work:
 - There shall be an addition of three (3) feet of ice & water dam added to the roof (price out an additional 3 feet).
 - 50 yr shingles (negotiable)

Attached is the revised bid form.

Please contact me at xsimpson@merrimacknh.gov or (603) 424-7075 if you have any questions pertaining to this addendum or other portions of our bid request.



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Bid on Roof Replacement for Ambulance Garage ***Revised Bid Form***

Due by 2:00PM on Tuesday, April 28, 2015

Roof Replacement Ambulance Garage according
to the Town's Bid specifications \$_____

Optional Items:
Additional 3' of ice & water dam \$_____

Additional cost for 50yr shingles \$_____

Work shall be completed within _____ days of receipt of related purchase
order.

The above bid is provided in accordance with the Town's bid invitation
dated April 9, 2015, walkthrough on April 21, 2015, and addendum issued
April 22, 2015 except as indicated below:

Bidder: _____

Street Address: _____

City, State, Zip Code: _____

Phone No: _____ Fax No: _____

Authorized Signature: _____

Printed Name: _____ Date: _____

E-Mail: _____

Bidder: _____

List of References:

Project: _____

Company Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone No: _____

Contact: _____

Project: _____

Company Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone No: _____

Contact: _____

Project: _____

Company Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone No: _____

Contact: _____